

## CITY OF HARRISONBURG

Department of Community Development  
Building Inspection Division  
409 South Main Street, P.O. Box 20031

Harrisonburg, Virginia 22801-7531

Telephone No. 540-432-7700 Fax No. 540-432-7777

Building Permit No: \_\_\_\_\_

Supplement to Building Permit No: \_\_\_\_\_

\_\_\_ BOCA Class "A" No: \_\_\_\_\_

\_\_\_ CABO Class "B" No: \_\_\_\_\_

Class "C" No: \_\_\_\_\_

Harrisonburg Business License No: \_\_\_\_\_

Contracted By \_\_\_ Performed By \_\_\_ Supervised By \_\_\_

Workers Name \_\_\_\_\_

Workers Mailing Address \_\_\_\_\_

City of \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Tele No \_\_\_\_\_

Bond Current Yes \_\_\_ No \_\_\_

Type of Work to be Done

New \_\_\_ Repair \_\_\_ Addition \_\_\_ Improvement \_\_\_

## REMARKS

Furnaces \_\_\_\_\_ BTU'S \_\_\_\_\_

Boilers \_\_\_\_\_ BTU'S \_\_\_\_\_

Refrigeration Systems \_\_\_\_\_ TONS \_\_\_\_\_

	Quantity
Water Heater(s) _____	Oven(s) _____ Deep Fryer(s) _____
Roof Top Unit(s) _____	Dryer(s) _____ Range(s) _____
Space Heater(s) _____	Steam Table(s) _____
Unit Heater(s) _____	Heat Exchanger(s) _____
Grill(s) _____	Crematory _____
Fire Dampers _____	Incinerator(s) _____

## Secondary Heat Sources

Gas Logs \_\_\_\_\_ Wood Stoves \_\_\_\_\_ Fireplace Inserts \_\_\_\_\_

Other Secondary Heat Sources \_\_\_\_\_

Estimated Total Value of Construction  
Including Value of Materials and Labor \_\_\_\_\_

Natural Gas Service ADD \_\_\_\_\_

LP Gas Service ADD \_\_\_\_\_

Furnace or Boiler ADD \_\_\_\_\_

Total Residential Fee \_\_\_\_\_

Total Commercial Fee \_\_\_\_\_

Building Division \_\_\_\_\_

## MECHANICAL PERMIT APPLICATION

Owner:

Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Tele No \_\_\_\_\_

## LOCATION OF LOT AND/OR TANK

House Number \_\_\_\_\_

Street Name \_\_\_\_\_

Sheet \_\_\_\_\_ Block \_\_\_\_\_ Lot(s) \_\_\_\_\_

Site Plan Required Yes \_\_\_

## Primary Heat Source

Natural Gas \_\_\_ Fuel Oil \_\_\_ LP Gas \_\_\_

## Storage Tanks

Underground \_\_\_ Aboveground \_\_\_

Type of Tank: Fiberglass \_\_\_ Steel \_\_\_ Other \_\_\_

Size of Tank(s) \_\_\_\_\_ Gal. Number of Tanks \_\_\_\_\_

Abandonment of Underground Tank \_\_\_

Removed By \_\_\_\_\_

	Quantity
1 ½ T Heat Pump _____	1 ½ T AC _____
2T Heat Pump _____	2T AC _____
2 ½ Heat Pump _____	2 ½ T AC _____
3T Heat Pump _____	3T AC _____
3 ½ T Heat Pump _____	3 ½ T AC _____
5T Heat Pump _____	5T AC _____
Other Heat Pump _____	Other AC _____
Range Hood(s) _____	Hood Fire Suppression ___

Single Family _____	Fee/TH Unit _____	Total _____
Townhouse _____	Fee/DP Unit _____	Total _____
Duplex _____	Fee/CD Unit _____	Total _____
Condo _____	Fee/MA Unit _____	Total _____
Apartment _____		
Secondary Heat Source Any Residence Complete Install _____		

Building Permit No. \_\_\_\_\_ State Levy \_\_\_\_\_

Date \_\_\_\_\_

Applicant \_\_\_\_\_